

<i>SERFF Tracking Number:</i>	<i>MUTM-125642297</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>United of Omaha Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>38953</i>
<i>Company Tracking Number:</i>	<i>KAREN HOWLAND</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>Medicare Supplement Advertising - UC6526</i>		
<i>Project Name/Number:</i>	<i>Medicare Supplement Advertising/UC6526</i>		

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: MUTM-125642297 State: ArkansasLH
Advertising - UC6526

TOI: MS051 Individual Medicare Supplement - SERFF Status: Closed State Tr Num: 38953
Standard Plans

Sub-TOI: MS051.001 Plan A Co Tr Num: KAREN HOWLAND State Status: Under Review
Filing Type: Advertisement Co Status: Reviewer(s): Stephanie Fowler

Author: Karen Howland Disposition Date: 06/12/2008

Date Submitted: 05/09/2008 Disposition Status: Filed

Implementation Date Requested: Implementation Date:

State Filing Description:

General Information

Project Name: Medicare Supplement Advertising

Project Number: UC6526

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 06/12/2008

State Status Changed: 05/28/2008

Corresponding Filing Tracking Number:

Filing Description:

NAIC #261-69868

FEIN #47-0322111

United of Omaha Life Insurance Company

Medicare Supplement Advertising

UC6526

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

SERFF Tracking Number:	MUTM-125642297	State:	Arkansas
Filing Company:	United of Omaha Life Insurance Company	State Tracking Number:	38953
Company Tracking Number:	KAREN HOWLAND		
TOI:	MS05I Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS05I.001 Plan A
Product Name:	Medicare Supplement Advertising - UC6526		
Project Name/Number:	Medicare Supplement Advertising/UC6526		

Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

This is a postcard-prospecting piece that agents/independent producers can use to advertise United of Omaha's monthly premiums. This particular piece has a grid that will allow the agents/independent producers to determine which age, ZIP code/location/state, and plan they want to advertise to the consumers. After the information has been compiled, the advertisement will be printed by our Home Office and sent to the agent/independent producer for their distribution. The advertisement will only show a sample of a potential rate.

We request that any information in brackets be considered variable. A Memorandum of Variable Material describing the variable items is attached.

Your notice of acceptance of this filing will be greatly appreciated.

Sincerely,

Mike Trebold
Product and Advertising Compliance Consultant
Regulatory Affairs
Phone: 402-351-2654
Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

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Company and Contact

Filing Contact Information

Mike Trebold, Product & Advertising Compliance Consultant
mike.trebold@mutualofomaha.com

Regulatory Affairs (402) 351-2654 [Phone]
Omaha, NE 68175 (402) 351-5298[FAX]

United of Omaha Life Insurance Company
Mutual of Omaha Plaza
Omaha, NE 68175
(402) 351-6420 ext. [Phone]

CoCode: 69868
Group Code: 261
Group Name:
FEIN Number: 47-0322111

Created by SERFF on 06/12/2008 04:28 PM

Filing Fees

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$25.00	05/09/2008	20207388

SERFF Tracking Number:	MUTM-125642297	State:	Arkansas
Filing Company:	United of Omaha Life Insurance Company	State Tracking Number:	38953
Company Tracking Number:	KAREN HOWLAND		
TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.001 Plan A
Product Name:	Medicare Supplement Advertising - UC6526		
Project Name/Number:	Medicare Supplement Advertising/UC6526		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	06/12/2008	06/12/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	05/28/2008	05/28/2008	Sally Hess	06/12/2008	06/12/2008

<i>SERFF Tracking Number:</i>	<i>MUTM-125642297</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>KAREN HOWLAND</i>		
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement - Standard Plans</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
<i>Product Name:</i>	<i>Medicare Supplement Advertising - UC6526</i>		
<i>Project Name/Number:</i>	<i>Medicare Supplement Advertising/UC6526</i>		

Disposition

Disposition Date: 06/12/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

Item Type	Item Name	Item Status	Public Access
Supporting Document <i>(revised)</i>	Memorandum of Variability	Filed	No
Supporting Document	Memorandum of Variability		No
Form	Postcard	Filed	No

SERFF Tracking Number: MUTM-125642297 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 38953
Company Tracking Number: KAREN HOWLAND
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Medicare Supplement Advertising - UC6526
Project Name/Number: Medicare Supplement Advertising/UC6526

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 05/28/2008
Submitted Date 05/28/2008
Respond By Date 06/30/2008

Dear Mike Trebold,

This will acknowledge receipt of the captioned filing.

AR Code Ann. 23-79-109(a)(4) states, "all Medicare supplement rates shall be based on a composite age basis only, and shall not be based on any age banding or other groupings." With that being said, please remove the "Age" column, as it would not be appropriate.

Please feel free to contact me if you have questions.

Sincerely,
Stephanie Fowler

Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/12/2008
Submitted Date 06/12/2008

Dear Stephanie Fowler,

Comments:

Response 1

Comments: Please see the response to your objection below as well as a revised copy of the Memorandum of Variability.

NAIC #261-69868
FEIN #47-0322111
United of Omaha Life Insurance Company
Medicare Supplement Advertising
UC6526

SERFF Tracking Number: MUTM-125642297 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 38953
Company Tracking Number: KAREN HOWLAND
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Medicare Supplement Advertising - UC6526
Project Name/Number: Medicare Supplement Advertising/UC6526

Dear Ms. Fowler:

Thank you for your review of the above-captioned form previously submitted to your Department on May 9, 2008. This letter is in response to your letter dated May 28, 2008.

You stated that pursuant to AR Code Ann. 23-79-109-(a)(4) states, "all Medicare supplement rates shall be based on a composite age basis only, and shall not be based on any age banding or other groupings." With that being said, please remove the "Age" column as it would not be appropriate. -- AR was inadvertently left off of the Memo of Variability (I've attached a revised version). We revised the Memo of Variability to explain that the rate chart is "overprinted" on to each piece. The "Age" column will be removed from the states that are not age rated.

Your further review and approval of this submission will be most appreciated. If I may be of additional assistance, please feel free to contact me.

Sincerely,

Mike Trebold
Product & Advertising Compliance Consultant
Regulatory Affairs
Phone: 402-351-2435
Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

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Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Memorandum of Variability
Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

<i>SERFF Tracking Number:</i>	<i>MUTM-125642297</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>KAREN HOWLAND</i>		
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<i>Product Name:</i>	<i>Medicare Supplement Advertising - UC6526</i>		
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Sincerely,
Karen Howland

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Form Schedule

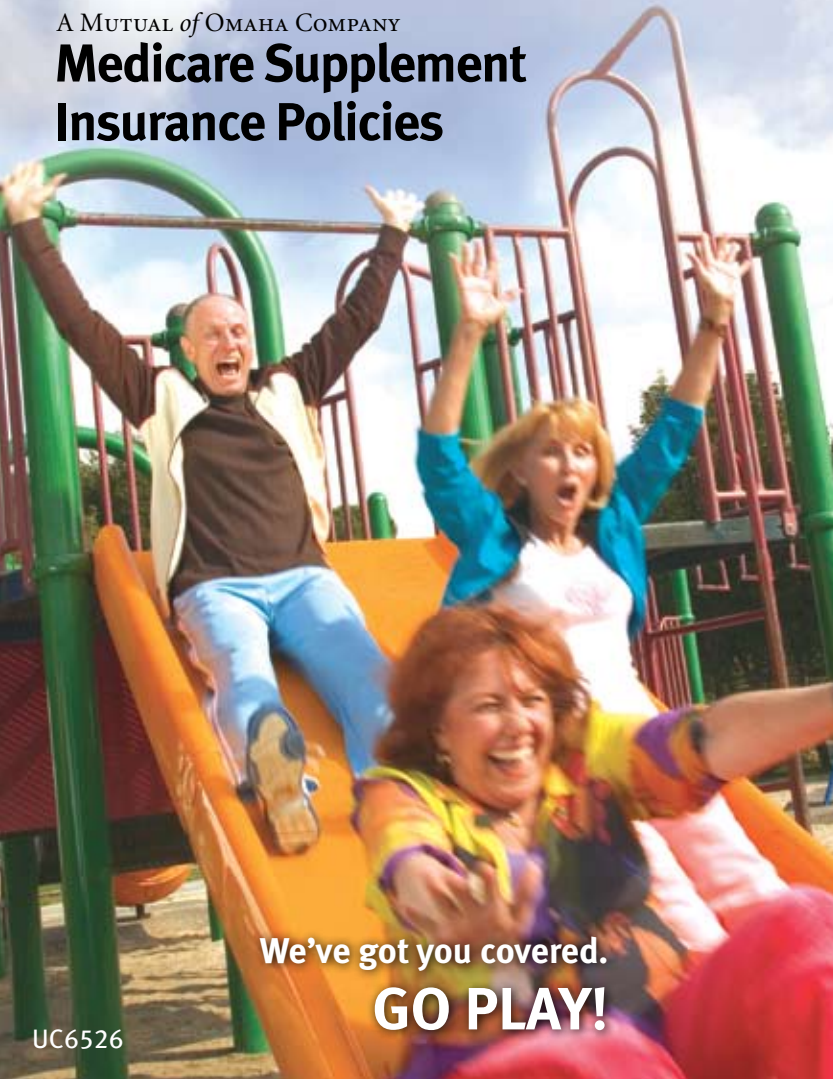
Lead Form Number: UC6526

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	UC6526	Advertising	Postcard	Initial			UC6526.pdf

UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY

Medicare Supplement Insurance Policies



We've got you covered.

GO PLAY!

UC6526

We offer you the friendly customer service, financial value and security you seek. So, you can relax and have some fun.

Compare and Save on Your United of Omaha Medicare Supplement Policy

[State, ZIP Codes or ZIP Codes Beginning With]	Age	Monthly Premium* Plan [Name]
	[Age]	[Rate]
	[Age]	[Rate]

*[Appropriate state rate disclosure]

Free Rate Quote

For your no-obligation rate quote– including any discount – on a United of Omaha Medicare supplement insurance policy, contact your licensed insurance agent today!

[Name]

[Phone Number]

[E-mail Address]



Medicare supplement insurance is underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175. United of Omaha is licensed nationwide except in NY. Neither United of Omaha Life Insurance Company nor its Medicare supplement insurance policies are connected with or endorsed by the U.S. government or the federal Medicare program. Policy forms UM1, UM2, UM3, UM4, UM5 or state equivalent. These policies have exclusions, limitations and reductions. For cost and complete details of coverage contact your United of Omaha insurance agent. This is a solicitation of insurance and an insurance agent will contact you.



UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL *of* OMAHA COMPANY

Mutual of Omaha Plaza

Omaha, NE 68175

mutualofomaha.com

Medicare Supplement Insurance

Low rates *plus* superior service

equal a great value for you.

Turn over for details!

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Rate Information

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>MUTM-125642297</i>	<i>State:</i>	<i>Arkansas</i>
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Supporting Document Schedules

Satisfied -Name:	Memorandum of Variability	Review Status:	
Comments:		Filed	06/12/2008
Attachments:			
	UC6526 (MoV) (AR inquiry) - Annotated.pdf		
	UC6526 (MoV) - Clean.pdf		

VARIABLE MATERIAL FOR ADVERTISING FORM UC6526

The following information in the aforementioned advertisement is bracketed to denote variable material.

Section

Rate Chart

** The rate chart is “overprinted” on to each piece. The “Age” column will be removed from the states that are not age rated.*

Explanation

Header Row:

1. Input a plan approved in the state or Zip code chosen.

Bottom Rows:

1. Column 1 - Input ZIP code(s), state or area where ad approved.
2. Column 2 - Choose an age 65 or older*
3. Columns 3 - Input corresponding rate for the age, plan and state/or Zip code(s)

State Rate Disclosure

AR – Sample Base Rates; Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

IL, MI, NV, OH, TN - Sample Base Rates: Female rates (male rates may be higher); Nontobacco rates (tobacco rates may be higher); Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

WV - Sample Base Rates: Female rates (male rates may be higher); Nontobacco rates (tobacco rates may be higher); rates are subject to change. Lower rates may apply, if eligible.

SC - Sample Base Rates: Female rates (male rates may be higher); Preferred rates (standard rates may be higher); Rates are subject to change and vary by ZIP code. Lower rates may apply, if eligible.

*The overprint section of this form is set up by the home office to assure that the correct and current rates are used.

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Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Supporting Document	Memorandum of Variability	05/09/2008	UC6526 (MoV).pdf

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